				02/20/2018 12:35:08
Fill in this inforr	Ashley		Peters	
First Name Middle Name  Debtor 2 Ronald (Spouse, if filing) First Name Middle Name  United States Bankruptcy Court for the: MIDDLE DIST. O  Case number (if known)		Peters, III Last Name  F PENNSYLVANIA	Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  MM / DD / YYYY	
Official Form 10 Schedule I: Yo				12/15
responsible for suppl include information a about your spouse. I your name and case	lying correct info bout your spous f more space is r	rmation. If you are m e. If you are separate needed, attach a sepa n). Answer every ques	arried and not filing jointly d and your spouse is not fi rate sheet to this form. On	ebtor 1 and Debtor 2), both are equally , and your spouse is living with you, ling with you, do not include information the top of any additional pages, write

1. Fill in your employment

information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about	Employment status	<ul><li>Employed</li><li>Not employed</li></ul>	<ul><li>Employed</li><li>Not employed</li></ul>
additional employers.	Occupation	Sales and Project Manager	Construction
Include part-time, seasonal, or self-employed work.	Employer's name	Alpha Space Control	Alpha Space Control
Occupation may include	Employer's address		
student or homemaker, if it		Number Street	Number Street
applies.		Chambersburg, PA	
		City State Zip Code	e City State Zip Code
	How long employed tl	here? 6 years	4 years

Part 2: **Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$4,316.00	\$2,478.67_
3.	Estimate and list monthly overtime pay.	3. 🖣	F\$0.00_	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$4,316.00	\$2,478.67

Official Form 106I Schedule I: Your Income page 1 Desc

Debtor 1 Ashley Peters
Debtor 2 Ronald Peters, III

Case number (if known) 1:17-bk-01785 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here ..... \$4,316.00 \$2,478.67 List all payroll deductions: \$1,174.81 \$528.00 5a. Tax, Medicare, and Social Security deductions 5a. 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$146.25 \$82.55 \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$226.92 \$226.92 5e. Insurance 5e. \$0.00 \$0.00 5f. **Domestic support obligations** 5f. 5g. \$0.00 \$0.00 5q. Union dues 5h. Other deductions. \$91.00 \$124.74 5h.+ Specify: Life Insurance Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +\$1,638.98 \$962.21 5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$1,516.46 \$2,677.02 List all other income regularly received: 8a. Net income from rental property and from operating a 8a. \$290.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c. \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Unemployment 8f. \$850.60 \$0.00 8g. 8g. Pension or retirement income \$0.00 \$0.00 Other monthly income. 8h. 🚣 \$800.00 Specify: See continuation sheet \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9 \$1,940.60 \$0.00 Calculate monthly income. Add line 7 + line 9. \$1,516.46 \$4,617.62 \$6,134.08 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$6,134.08 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? ✓ No. None. Yes. Explain:

Debtor 1 **Ashley Peters** Debtor 2 Ronald Peters, III Case number (if known) 1:17-bk-01785 For Debtor 1 For Debtor 2 or non-filing spouse 8h. Other Monthly Income (details) **Second Job** \$250.00 Tax refund average \$550.00 Totals: \$800.00 \$0.00

Page 3 of 8

Main Document

G	ill in this inform	nation to identi	fy your case:		<b>.</b>		
	Debtor 1	Ashley	Peter		Check if this	s is: ended filing	
		First Name	Middle Name Last Na	ıme		lement showing	
	Debtor 2 (Spouse, if filing)	Ronald First Name	Middle Name Last Na			r 13 expenses as ng date:	s of the
	United States Bankr	uptcy Court for the	MIDDLE DIST. OF PENNS	SYLVANIA		D / YYYY	<u> </u>
	Case number (if known)	1:17-bk-01785					
O	fficial Form 10	)6J			J		
S	chedule J: Yo	ur Expense	S				12/15
nai	rrect information. If me and case number	f more space is ne er (if known). Ans	le. If two married people are fil eeded, attach another sheet to t wer every question.				
ŀ	Part 1: Descri	be Your House	ehold				
1.	Is this a joint case	e?					
2.	No	Debtor 2 live in a so	eparate household? e Official Form 106J-2, Expense: No	s for Separate Househ	nold of Debtor	2.	
	Do not list Debtor Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Debiol 2.			Son			□ No · ☑ Yes
	Do not state the de names.	ependents'		Son			□ No
				Son			Yes No Yes
							No Yes No Yes
3.	Do your expenses expenses of peop yourself and your	ole other than	☑ No □ Yes				
ŀ	Part 2: Estima	ate Your Ongoi	ng Monthly Expenses				
to	timate your expens	es as of your bank of a date after the	cruptcy filing date unless you a bankruptcy is filed. If this is a	-		•	
			h government assistance if you n Schedule I: Your Income (Offic			Your expens	es
4.			enses for your residence. any rent for the ground or lot.			4.	\$2,000.00
	If not included in	line 4:					
	4a. Real estate ta	axes				4a	
	4b. Property, hom	neowner's, or rente	r's insurance			4b	
	4c. Home mainte	nance, repair, and	upkeep expenses			4c	\$50.00
	4d. Homeowner's	association or cor	dominium dues			4d	

Debtor 1 **Ashley Peters** 

Debtor 2 Ronald Peters, III Case number (if known) 1:17-bk-01785 Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$350.00 6b. Water, sewer, garbage collection 6b. \$75.00 6c. Telephone, cell phone, Internet, satellite, and 6c. \$260.00 cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$775.00 Childcare and children's education costs 8. \$430.00 Clothing, laundry, and dry cleaning 9. \$60.00 10. Personal care products and services 10. \$40.00 11. Medical and dental expenses 11. \$30.00 12. Transportation. Include gas, maintenance, bus or train 12. \$380.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$100.00 magazines, and books 14. Charitable contributions and religious donations 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. \$120.66 15c. Vehicle insurance 15c. \$195.00 15d. Other insurance. Specify: 15d. **16.** Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 2015 Dodge Durango 17a. \$622.00 17b. Car payments for Vehicle 2 2007 Infiniti M35 17b. \$300.00 17c. Other. Specify: \_\_\_ 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you.

19.

	tor 1 tor 2	Ashley Peters Ronald Peters, III	Case number (if known)	1:17-bk-01785
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	Specify: See continuation sheet	21. +	\$100.00
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$5,887.66
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$5,887.66
23.	Calcu	late your monthly net income.	_	
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$6,134.08
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b> _	\$5,887.66
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$246.42
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you fi	le this form?	
		xample, do you expect to finish paying for your car loan within the year or do you expent to increase or decrease because of a modification to the terms of your mortgage	, ,	
		No.		
	<b>☑</b> 、	Yes. Explain here: In December, Debtor's began to incur additional expenses for thei	r children's health insu	urance through CHIP.

Debtor 1 Ashley Peters
Debtor 2 Ronald Peters. II

Debtor 2 Ronald Peters, III Case number (if known) 1:17-bk-01785

21. Other. Specify:

Pet food \$60.00 diaper \$40.00

Total: \_\_\_\_\_\$100.00

Fill in this info	ormation to i	dentify your case	:		
Debtor 1	Ashley		Peters		
	First Name	Middle Name	Last Name		
Debtor 2	Ronald		Peters, III		
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court fo	or the: MIDDLE DIST	OF PENNSYLVANIA	_	
Case number	1:17-bk-0178	5			☐ Check if this is an
(if known)					amended filing

## Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney  No No	
<b>☑</b> No	to help you fill out bankruptcy forms?
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summa	ry and schedules filed with this declaration and that they are
true and correct.	
X /s/ Ashley Peters X /s/ R	onald Peters, III
Ashley Peters, Debtor 1 Rona	ld Peters, III, Debtor 2
Date 02/20/2018 Date	02/20/2018 MM / DD / YYYY